STATEMENT OF

RECEIVED 7

FORM 1		ORGANIZATION				FEC MAIL CENTER
NAME OF COMMITTEE (in	n full) .	(Check if n is changed		ample:If typing, type er the lines.	12FE4M	15
ILLINOIS, I	ŖĘŖŲĔ	LICAN E	KEÇUTI	VE BOARD	للللل	
	1111	P. O. BO	X 66731	3		<u> </u>
ADDRESS (number a	nd street)			<u></u>	<u>. l l l l</u>	-
(Check if address is changed)		POMPAN	OBEA	CH	FL	33066
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MA	address		-	^{ddress)} (ecutiveBoal	rds@gn	nail.com
COMMITTEE'S WEB PAGE ADDRESS (URL)						
(Check if is change						
2. DATE 11	i ^a ′ 10°	´ 2012 Č				
3. FEC IDENTIFIC	CATION NUI	MBER	С			
4. IS THIS STATE	MENT 🗵	NEW (N)	OR [AMENDED (A)		
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer PETERSON TRUMP						
Signature of Treasur		Peterson	Trung	2	Date 1	1°′ 10°′ 20`12 `
NOTE: Submission of false, erroneous, or incompliste inflatmation may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.						
Office Use Only				For further Information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)